Missouri Division of Alcohol and Drug Abuse

| Bulletin Number: FY12–Clinical-20 | CLINICAL SERVICES BULLETIN | Effective Date: September 1, 2011 |
|--------------------------------------|---|---|
| New | Subject: CSTAR Medically Monitored Inpatient Detoxification | Number of Pages: 2 |

1. Programs Affected

1.1 General Population and General Population Enhanced Comprehensive Substance Treatment and Rehabilitation (CSTAR) programs that are formally approved by the Division of Alcohol and Drug Abuse (ADA) to provide Medically Monitored Inpatient Detoxification (MMID).

2. Purpose

2.1 To describe a new CSTAR service that is available to eligible individuals who, because of intoxication, impairment, or withdrawal, require medical care due to symptom severity, medical history, and/or other issues.

3. Definition

- 3.1 Detoxification is the process of withdrawing an individual from a specific psychoactive substance (alcohol, illegal drugs, and/or prescription medications) in a safe and effective manner.
- 3.2 The MMID level provides care to individuals whose withdrawal signs and symptoms are sufficiently severe to require 24-hour inpatient care and monitoring; however, the full resources of a hospital are not necessary.
- 3.3 The detoxification process consists of an evaluation and stabilization period, and the facilitation of transition into ongoing substance abuse treatment. Routine medical services are provided, and medications are used, when clinically indicated, to alleviate symptoms of intoxication, impairment, or withdrawal.

4. Provider Eligibility

- 4.1 Providers must be certified by the Department of Mental Health to provide Modified Medical Detoxification services in accordance with *9 CSR 30-3.120*.
- 4.2 Providers must be contracted with the Department of Mental Health to provide CSTAR services.
- 4.3 The full resources of a general acute hospital must be available through a written local agreement in the event hospitalization of a consumer is required during the detoxification process.

5. Consumer Eligibility

- 5.1 To be eligible for MMID services, a person must:
 - 5.1.1 Present symptoms of intoxication, impairment, or withdrawal; *and*,
 - 5.1.2 Require supervision and monitoring of physical and mental status to ensure safety.

- 5.2 A consumer is eligible for MMID services if one or more of the following *additional* criteria are met:
 - 5.2.1 Significant intoxication that impairs ability to minimally care for self;
 - 5.2.2 Significant intoxication and/or impairment and lacking a supportive, safe environment, and therefore at risk of continued use of alcohol or other drugs;
 - 5.2.3 Significant intoxication and/or impairment requiring ongoing observation and monitoring of vital signs due to a prior history of physical complications associated with withdrawal; or,
 - 5.2.4 Presents a likelihood of harm to self or others as a result of intoxication, impairment, or withdrawal.
- 5.3 Exclusion criteria include the presence of acute medical or psychiatric conditions requiring hospitalization. In the event the agency determines the consumer is no longer appropriate to receive services in the MMID setting because of potentially acute medical needs, the agency shall refer these consumers to a hospital, as referenced in 4.3 above.

6. Service Provision

- 6.1 Consistent with 9 CSR 10-7.110, the organization shall ensure that all staff providing services within the MMID setting shall possess the training, experience, and/or credentials to effectively perform assigned services and duties. Such training, experience and/or credentials, as well as demonstrated competencies, must be documented in personnel records.
- 6.2 Placement in the MMID level of care should be appropriate to the consumer's needs as determined through a screening process conducted by properly trained staff.
 - 6.2.1 Upon initial contact, a person shall be screened by a licensed nurse and assigned to a level of care based on the signs and symptoms of intoxication, impairment, or withdrawal, as well as factors related to health and safety.
 - 6.2.1.1 Licensed nursing staff must have demonstrated and documented competencies in the administration of detoxification screening protocols,
 - 6.2.2 Specific screening protocols, approved and required by the Division of ADA, shall be used by the nursing staff to evaluate the individual's physical and mental condition and to help guide the level of care decision:
 - Clinical Institute Withdrawal Assessment (CIWA-AR)
 - Clinical Opiate Withdrawal Scale (COWS)
 - 6.2.3 Admission eligibility may be initially determined by licensed nursing staff at the time of presentation based on screening protocols, but the physician/APN must authorize the admission.
 - 6.2.3.1 Prior to admission, the licensed nursing staff that conducted the screening must verbally communicate with the physician/APN regarding the consumer's presenting condition and protocol results.

- 6.2.3.2 The physician/APN must verbally authorize the admission of a consumer to the MMID program, based on the exchange of information outlined in 6.1.3.1.
- 6.2.3.3 The screening results, summary of physician/APN verbal consultation and the physician/APN's provisional diagnosis must be documented in the record and signed by both the licensed nursing staff and the physician/APN.
- 6.2.4 The physician/APN must render a formal, qualifying diagnosis within 24 hours of admission based on a face-to-face evaluation with the consumer. Physician authorization and diagnosis must be clearly documented and appropriately authenticated.
- 6.3 There shall be monitoring and assessment of the individual's physical and emotional status during the MMID process.
 - 6.3.1 Vital signs are taken on a regular basis, with the frequency determined by client need, based on a standardized assessment instrument.
 - 6.3.2 Blood alcohol concentration may be monitored upon admission and thereafter as indicated. Further testing of urine or blood may be conducted by qualified personnel.
- 6.4 Counseling, community support, and other services shall be provided as necessary to resolve immediate crises and to promote engagement in ongoing substance abuse treatment. Every effort should be made to engage and successfully transition individuals from the MMID setting to substance abuse treatment services.
- 6.5 Additional requirements related to the provision of MMID services are outlined in 9 CSR 30-3.120.

7. Personnel

- 7.1 A physician or advanced practice nurse (APN) must be on call 24 hours per day, seven (7) days per week to provide medical evaluation and ongoing withdrawal management.
 - 7.1.1 The physician requirement can be met either with a Missouri licensed physician or, a Missouri licensed psychiatrist.
 - 7.1.2 The requirement for an APN is met if this professional is licensed and authorized to title and practice in Missouri as an advanced practice nurse pursuant to section 335.016, RSMo and who is engaged in a written collaborative practice arrangement as defined by law.
- 7.2 Licensed nursing staff must be present 24 hours per day. A registered nurse (RN), licensed in Missouri, with relevant education, experience, and competency is available on-site or by phone for 24-hour supervision.
- 7.3 Two (2) trained staff members must be on-site at all times to ensure continuous supervision and safety. Clients must be supervised at all times by a staff member with current certification in first aid and cardiopulmonary resuscitation.
- 7.4 Staff providing direct supervision and monitoring of consumers shall demonstrate competency in the following topics, which include, but are not limited to:
 - Recognizing symptoms of intoxication, impairment and withdrawal;

- Monitoring vital signs; and
- Understanding basic principles and resources for substance abuse treatment.

8 Limitations

- 8.1 All costs associated with the provision of services to a consumer while in the MMID level are included in the established per diem rate with the exception of the following:
 - Laboratory services; and
 - Prescription medications used specifically in the detoxification process and medications prescribed for the treatment of addictions.
 - 8.1.1 For Medicaid-eligible consumers, <u>all</u> prescription medications must be obtained via the MO HealthNet pharmacy benefit.
 - 8.1.2 For individuals not covered by Medicaid, only prescription medications used specifically for detoxification and/or medications approved for the treatment of addictions may be billed to the Division of ADA. The Division will not cover the cost of medications required for the treatment of a medical condition apart from intoxication, withdrawal, or addiction.
- 8.2 Consumers must meet clinical eligibility requirements established by the Division of ADA.
- 8.3 Length of stay in MMID programs is limited to five (5) days. If MMID services are necessary beyond this five-day limit, such services must be authorized through the Division of ADA's clinical utilization review unit. Authorization must be obtained prior to service delivery, unless extenuating circumstances can be demonstrated.
- 8.4 Facilities where CSTAR MMID services are provided are limited to 16 beds or less.